

# Combat Life Saver

## Module 2: Evaluating a Casualty

Next, we'll discuss the steps to take to effectively "Evaluate a Casualty."

10th MOUNTAIN DIVISION  
(LIGHT INFANTRY)



# Evaluating a Casualty [Care Under Fire]

- Scene Safety
- Scan the area for any dangers, ( example: IED, Sniper fire, “round cook off” in armored vehicles, and any NBC Threat)
- Determine best route to approach casualty if able to. Don't become another target for the enemy.
- Anticipate how your actions will affect enemy fire.

# SCENE SAFETY!!!



AP / Khalid Mohammed

# Assess Situation

- Determine safety of scene
- Determine mechanism of injury
- Determine number of casualties
- Request additional help if necessary



# **Evaluating a Casualty [Care Under Fire]**

## **( Cont'd)**

- **Approach the Casualty**
- **Suppress enemy fire, Stop any gross bleeding with a Tourniquet. Both you and casualty return fire if able to.**
- **Form a general impression of patient based on Mechanism of Injury and Casualty's status.**
- **If you move patient, secure sensitive items (ANCD, Weapons, Ammo)**

# **Evaluating a Casualty [Tactical Field Care Phase]**

- **Check Casualties responsiveness**
  - **AVPU**
- **A=Alert, V=Verbal, P=responds to Pain, U=Unresponsive**
- **Ask Casualty where they are hurt**

# Evaluating a Casualty [Tactical Field Care Phase]( Cont'd)

- Position casualty
- Roll casualty onto his back, with minimal neck movement.
- Rapidly scan the casualty for any life threatening emergencies
- CBA: Circulation ( gross bleeding), Breathing (troubled, difficulty noted?), Airway ( open or obstructed)-
- ALL CBA's must be fixed before moving on to other evaluation or treatment.

# Evaluating a Casualty [Tactical Field Care Phase]( Cont'd)

## **BLEEDING (Circulation)**

- Consider placing a Pressure bandage (and/or a Hemostatic dressing) on site of wound, and then slowly loosen the Tourniquet [ which was placed on casualty during Care Under Fire]
- If Bleeding resumes, then re-tighten tourniquet immediately. If it is under control, leave tourniquet in place in case you need it again.



# Evaluating a Casualty [Tactical Field Care Phase]( Cont'd)

## BREATHING

- Look , Listen, Feel ( *Decompress Tension Pneumothorax if found—See Module #4*)
- Check casualty for Open Chest wounds, don't forget to look for exit wounds
- Seal all wounds in the thoracic cavity with an occlusive dressing

# Evaluating a Casualty [Tactical Field Care Phase]( Cont'd)

## AIRWAY

- Remember your General Impression. If a casualty is speaking, his airway is secure.
- If necessary, open airway manually:
  - Head-Tilt/Chin-Lift
- If you have any doubts, secure the airway mechanically.

# Circulation

- Look for severe external bleeding
- **STOP THE BLEEDING!**
  - Direct pressure
  - Pressure points
  - Tourniquet
- Look for evidence of internal bleeding
  - Check pulses
  - Observe for shock
- Initiate IV fluids as needed



# Breathing

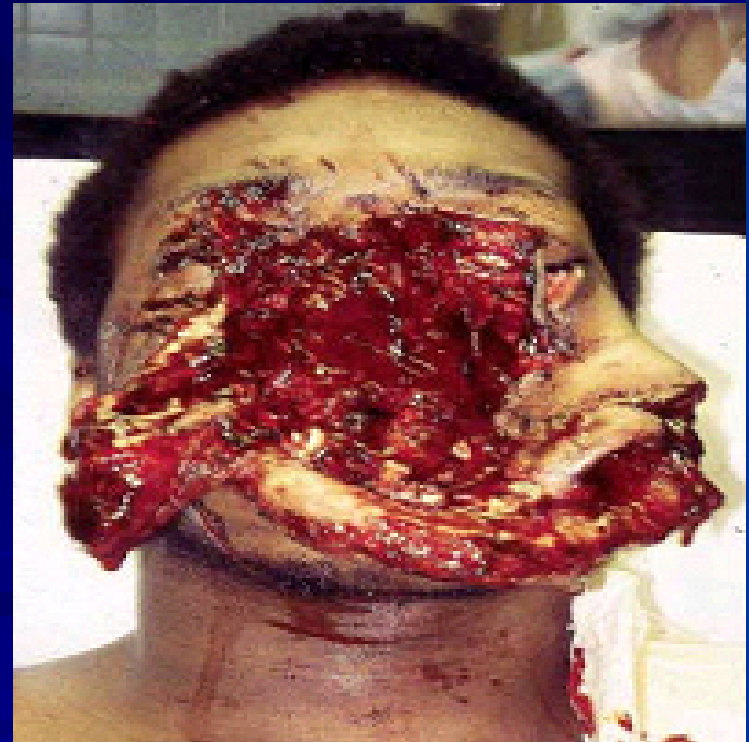
- Look, listen, and feel
- Is breathing adequate to support life?
- Respiratory Distress vs. Respiratory Arrest



(If chest injury and severe difficulty breathing, perform needle chest decompression to relieve tension Pneumothorax)

# Airway

- Attention to stabilization of cervical spine if appropriate
- Airway obstructions are often noisy (but not always)
- Suspect airway problems if:
  - Unconscious
  - Head, face, neck, chest injuries
- Open, clear, and maintain the airway



# Evaluating a Casualty [Tactical Field Care Phase]( Cont'd)

- If casualty has a penetrating chest injury and is not breathing, or attempting to make any effort to breathe, then DO NOT ATTEMPT TO TREAT THE INJURY
- If you find a casualty who has no signs of life ( no breathing, or attempt to breathe, and no pulse ) , then DO NOT CONTINUE FIRST AID

# **Evaluating a Casualty [Tactical Field Care Phase]( Cont'd)**

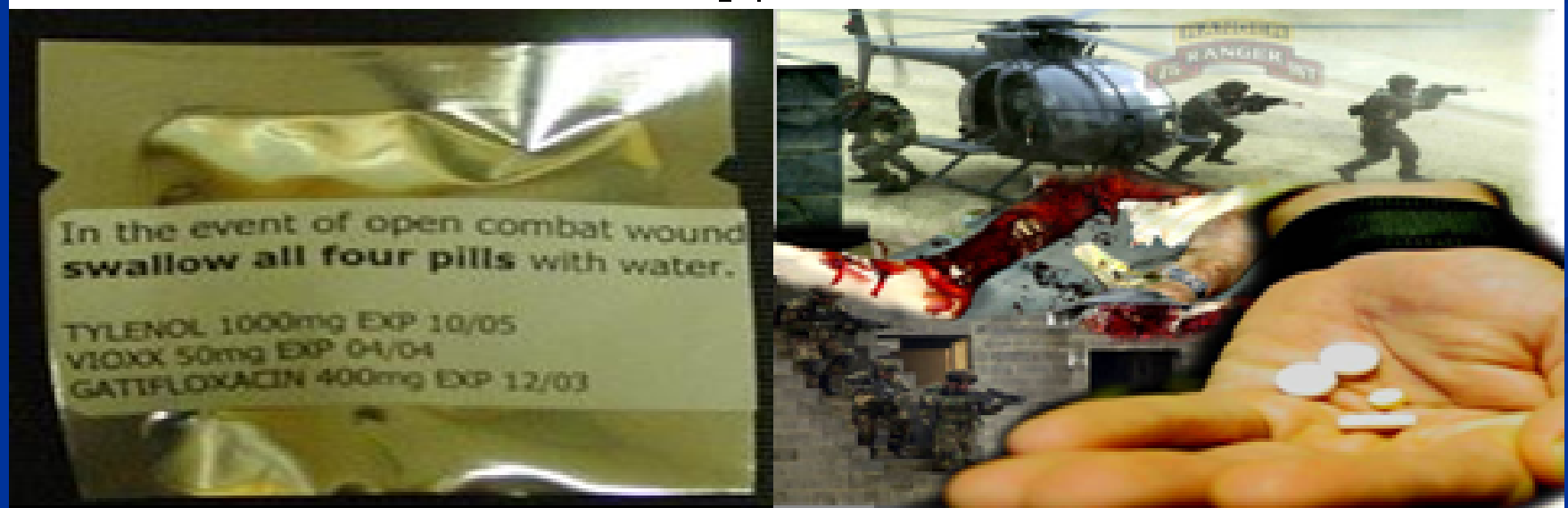
## **ADDITIONAL CARE AND EVALUATION**

- **Treat other wounds, do a head to toe check**
- **Administer Casualty's Pill pack from his IFAK Pack. (All 4 Pills : 2 Tylenol, 1 Mobic, 1 Guatofolaxcin)—If conscious. If casualty unconscious, do not administer.**

# Combat Pill Pack

## Pain Control

- Able to fight
  - Celebrex 200mg or Meloxicam (Mobic®) 15mg po initially
  - Acetaminophen 1000 mg po q6hr
  - Gatafloxacin 400 mg po





# **Evaluating a Casualty (Practical)**

- **At this time we will practice how to “Evaluate a casualty”**
- **First we will watch a demonstration**
- **Next Buddy up, and practice on each other. Instructor will move about and watch you.**